

Appendix Q1 – Statement of Work Application

**Fiscal Year: 2018**  
**National Summer Transportation Institute**  
**Statement of Work Application**

**Transmittal Sheet**

**Host Site (College/University):**

**Address (including zip):**

**Contact Representatives**

**Host Site**

**Project Director:**

**Title:**

**Phone:**

**E-Mail:**

**State Transportation Agency Liaison:**

**Name:**

**Title:**

**Phone:**

**E-Mail:**

**Federal Highway Administration Division office**

**Name:**

**Title:**

**Phone:**

**E-Mail:**

**Please Complete and Return This Sheet Along With Your Statement of Work.**

## National Summer Transportation Institute Statement of Work Application

### Section A: Program Information

Host Site (Name):			
State Abbreviation:	<input type="checkbox"/>	<input type="checkbox"/>	Zip: <input type="text"/>
Congressional District Number(s):			
FHWA Funding Requested:			
Is this a new NSTI? Y/N			
Number of years in existence:			
Type of In-Kind Contributions:	N/A <input type="checkbox"/>	Monetary <input type="checkbox"/>	\$ <input type="text"/>
	Other (Provide brief description): <input type="text"/>		

Program Length:	Program Dates:		
NSTI (weeks):	<input type="text"/>	<input type="text"/>	<input type="text"/>
FAA ACE Academy (days):	<input type="text"/>	<input type="text"/>	<input type="text"/>
ACE Academy Location:	<input type="text"/>		
Anticipated Number of Students:	<input type="text"/>		

Select Type of Program:	<input type="checkbox"/> Residential	<input type="checkbox"/>	<input type="checkbox"/> Non-Residential	<input type="text"/>
Select Grade Levels:	<input type="checkbox"/> Middle School (grades 6-8)	<input type="checkbox"/>	<input type="checkbox"/> High School (grades 9-12)	<input type="text"/>
Priority (if applicable, rank 1-5)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Each National Summer Transportation Institute (NSTI) Host Site is responsible for the following:**

1. **Financial Reimbursement:** Submit all invoices in a timely manner. Note: Expenses on invoices should reflect only the expenses listed in the approved budget.
2. **Section 508 Standards of the Rehabilitation Act:** Ensure that their procurement of electronic and information technology takes into account the needs of all end users – including members of the public with disabilities who are seeking information or services, have access to and use of information and data that is comparable to that provided to others.
3. **Annual Post Program Questionnaire:** Complete the online NSTI Questionnaire at the end of the program.
4. **Program Evaluations:** Conduct weekly and post program participant evaluations.

Note: Where needed, reasonable accommodations must be made for persons with disabilities.

## **Section B: Program Overview**

Provide a one or two-page summary of the NSTI program the host site plans to implement. Information in this section should address the program objectives delineated in the solicitation memorandum, and include a description of curriculum, specific field trips planned, and examples of any enhancement activities planned.

## **Section C: Program Administration**

- 1. Recruitment and Student Selection Procedures**
- 2. Staffing Requirements - *Complete Table A***
- 3. Program Cost (Detailed Budget Summary) - *Complete Table B***
- 4. Inter-Modal Advisory Committee - *Complete Table C***
- 5. Specific-Named Partners - *Complete Table D***
- 6. Implementation Schedule - *Complete Table E***
- 7. Program Curriculum (STEM-Focused)**
  - Academic
  - Enhancement
  - Sports/Recreation (*residential programs*)
- 8. Follow-up Survey of Students**